# Libby Community Advisory Group Meeting Summary February 16, 2006

### **Introductions**

Gerald Mueller and members of the Libby Community Advisory Group (CAG) introduced themselves. A list of the members in attendance is attached below as Appendix 1.

## Agenda

The CAG agreed to the following agenda for this meeting:

- Agency Reports
  - ⊕ Libby Schools
  - **⊗** EPA
  - **⊗** ATSDR
  - **⊗** MASSA
  - State
  - **⊛** TAG
  - **⊕** CARD Clinic
- = Public Comment

## **Libby Schools**

K.W. Maki reported that a letter had been sent from a private citizen to Congressman Rehberg and EPA stating that Libby's schools are unsafe and should be evacuated and the children moved elsewhere. The school system has also received a letter from EPA in Denver setting forth requirements for addressing asbestos. Mr. Maki said that remediation has taken place to address vermiculite/asbestos contamination and air monitoring has been conducted to assure that the schools are safe. Regarding the contamination of tree bark on school grounds recently found by the University of Montana researchers, instructions have been issued to avoid disturbing the bark. Because neither the research nor EPA has determined the significance of the bark contamination, the schools do not know what if any additional action is warranted regarding it. Mr. Maki stated that the schools may be asking EPA for additional assistance.

Comment by Peggy Churchill - EPA and the schools should collaborate on a response concerning the tree bark asbestos. The letter stating that the schools are unsafe because of the recently announced tree bark data is an example of how concern can expand in the absence of good information.

CAG Member Comment - We should remember that we asked Dr. Ward to update us about his research results as they are developed. Dr. Ward was reluctant to discuss the data in the absence of conclusions about their health implications but he did so because of his commitment to keep us informed.

CAG Member Question - Is the concern just about the tree bark?

Answer - Yes. We have management plans for pipe wrap insulation and other contamination, but other than not disturbing the trees, we are not sure what to do about the bark contamination.

## **EPA Report**

Peggy Churchill reported for EPA on the following topics.

<u>Cleanups</u> - Cleanup work will resume next week beginning with two interior residential cleanups. Two task orders have been issued, one for work at the landfill and a second for 15 interior cleanups.

<u>Supervisor and Inspector Training</u> - A training session in conjunction with the Community College for supervisors and building inspectors will be held on February 22. The training will be free. Enrollment for the session has almost filled the available slots.

Dream It Do It Conference - The conference is scheduled for August.

<u>Record of Decision</u> - The record of decision (ROD) for the Libby remediation work has been delayed. EPA now plans to issue a proposed plan in August. Depending on the amount and nature of public comment on the proposal, the interim ROD will be released this December.

CAG Member Question - What was the old schedule?

Answer - The ROD schedule has changed several times. The most recent schedule before the postponement called for releasing the proposed plan in July. We did not have a date for release of the interim ROD. We will publish a Q&A on the schedule change.

Audience Member Question - Why is the ROD being delayed?

Answer - The primary reason is the work on the technical documents. They must be reviewed by the Technical Advisory Group (TAG), Region 8, and headquarters. Asbestos is a controversial topic which means that the ROD must be correct and supported by headquarters. We passed out at the last CAG meeting the flow chart for developing the interim ROD (see January 12 meeting summary).

CAG Member Question - Is Jim Christiansen still involved in preparation of the ROD? Answer - Yes.

# **ATDSR Report**

Dan Strausbaugh reported on behalf of ATSDR using the handout included in Appendix 1 below. ATSDR is developing a communication plan for the 28 national sites to which Libby asbestos was shipped and which have significant asbestos contamination. The communications materials are being developed by ATSDR in cooperation with the American Thoracic Society. The materials will be released first in Libby to the CAG and ARD Net so that the community with the most experience with asbestos contamination can review and comment on them. ATSDR has also revamped is asbestos web-site (<a href="www.atsdr.cdc.gov/asbestos">www.atsdr.cdc.gov/asbestos</a>) as a part of this plan. The schedule for document release is included in Appendix 1. The first document addressing new Montana Asbestos Screening and Surveillance Activity (MASSA) staffing will be released next week, and separate documents will be issued each month until April. The second release will address asbestos education for health care providers. The third mailing will provide information to MASSA clients. The first page of Appendix 1 includes more detail about the materials to be released. The second page describes the content of the MASSA new client

kit. Mr. Strausbaugh encouraged people in Libby to contact him in Helena at 1-406-457-5007 or the locally through MASSA with questions or comments.

Audience Member Question - Who pays for the MASSA screenings?

Answer - The screenings are free to those meeting the eligibility requirements, i.e. living, working or playing in Libby for six consecutive months prior to December 31, 1990. This is the same as requirements for the screening that ATSDR conducted in Libby in 2000 and 2001.

Audience Member Question - What is the frequency and objectives of the MASSA screening? Answer - The frequency depends on the person's circumstances, e.g. age, exposure, etc. The objective question should be addressed to Dr. Headapohl, MASSA's new medical consultant.

Audience Member Question - How is the screening being funded? Answer - By ATSDR.

CAG Member Comment - People in Libby are confused about MASSA's mission, which is screening and not health care.

Response - ATSDR and MASSA have two objectives: first, to provide a public health service eare in Libby; and second, to gather information about long-term health effects of the asbestos exposure. These objectives do <u>NOT</u> have a treatment component. People are encouraged to take the results of their screening and consult with their local health care provider.

Audience Member Question - You said that ATSDR is gearing up for action nationally. Will screening be conducted at the 28 other sites, and how will it be funded?

Answer - Screening may be conducted at two or three other sites in conjunction with the state health departments. Screening will not be conducted at all 28 sites; each site has been evaluated separately for the public health consequences unique to it which are a function of how the material was transported and processed at each and the amount of the resultant exposure and the exposure pathways.

CAG Member Question - How soon will the screening take place at the different sites? Answer - I don't know specifically. The dates will be selected in consultation with the local health departments.

CAG Member Question - You have mentioned plans for 28 sites. There were many other locations involved with Libby asbestos.

Answer - I am not versed in the other sites. I know that initially EPA and ATSDR identified all sites involved with receiving or processing W.R. Grace material. All of the sites were scored to determine their potential health hazard. The 28 presented the highest hazard.

CAG Member Question - What are you looking for at the other sites, ground contaminated or people sickened?

Answer - ATSDR's focus is on public health effects and exposure pathways. We will be developing public health plans for the 28 sites that ranked the highest in public health hazards.

CAG Member Comment - Some sites are long gone. Don't just look at amounts of past

production.

Audience Member Comment - When it comes to considering health effects at other sites, we should remember that every ounce of asbestos contaminated material received and processed at other sites came from Libby. Our exposure levels are not comparable to other sites. That is why we need the "Libby fix" in the federal asbestos legislation.

Audience Member Question - You mentioned that you are developing materials to educate the health providers in other locations affected by asbestos. Will the materials take into account the different presentation and development of disease caused by tremolite asbestos? Answer - I have not reviewed the material yet. It is being developed in conjunction with the American Thoracic Society, and it will be reviewed here.

Audience Member Question - Who is in charge of the development of the outreach materials? Answer - A team of people including staff of ATSDR, state health departments and the American Thoracic Society is overseeing the development.

Audience Member Question - Will the material be in final form when we see it here in Libby? Answer - You will be the first community to evaluate it. Our intent is to use the response here to make it more effective.

CAG Member Comment - Thanks for taking what has been learned here and making this information apart of the communication plan for other sites.

### **MASSA**

Gayle Shirley, DPHHS Public Information Officer, Dr. Dana Headapohl, MASSA medical consultant, and Clair Evans, RN reported on the MASSA program. MASSA is run by DPHHS in partnership with the National Jewish Medical Center in Denver. MASSA's objective is to provide every eligible person free screening including a chest x-ray and a spirometry test. Dan Strausbaugh explained the eligibility criteria which is unchanged since ATSDR's screening in Libby. People are provided the results of their x-ray and spirometry test and are informed if their tests identify a lung abnormality. They are advised to take this information to their personal health care provider for diagnosis and treatment. Since its inception three years ago MASSA has provided free screening to 2,200 people. Ms. Shirley provided a handout that will be mailed on to MASSA program participants on February 17, 2006. See Appendix 3. The handout consisted of a letter signed by Dr. Steven Helgerson, the State Medical Officer, and an information sheet about the MASSA staff. Ms. Shirley stated that people should feel free to contact her if they have questions or concerns about the MASSA program. Her telephone number is (406)444-2596 and her email address is gshirley@mt.gov.

Audience Member Comment - I talk with people everyday who are confused by the way things are set up. They have the screening and think that their health care needs will be taken care of. Response - We had a good meeting with ARD Net today. The local participants emphasized the need for us to communicate clearly that MASSA is not providing diagnosis and treatment. In our intake interview with program participants, we advise people to take their screening results to their local medical provider. The release sheet that the patients sign states in bold type the

same thing, that they should take their results to their local medical provider for treatment. To help reduce the confusion we might try emphasizing is that the screening provides two pieces of information that doctors and patients can use to assess the situation.

CAG Member Comment - People commonly misunderstand that MASSA works with the CARD Clinic.

CAG Member Comment - The crux of this problem lies in the past. We tried to communicate the confused roles to Dr. Spence, but our concern fell on deaf ears. We look forward to working with the new MASSA personnel.

Audience Member Question - The two pieces of information approach is a great suggestion. The x-ray is not a cat-scan and spirometry does not provide a complete pulmonary function test.

CAG Member Question - Could MASSA establish a repository for the x-rays that local health care providers could access?

Answer - This is a helpful idea worth pursuing. A repository could facilitate tracking disease progress. By policy, we now give people their x-rays and spirometry results, and sometimes they lose them. At some point x-rays will be recorded digitally which will make maintaining a repository easier. Perhaps we could have a repository at St. John's Hospital. At present, the "B-Readers" prefer to read hard copies of x-rays. Although studies comparing film versions with digital copies are under way, there is not yet a consensus that digital images are sharp enough.

# **State Report**

Catherine LeCours, Department of Environmental Quality (DEQ), reported that a toll-free number, 1-888-420-6810, is now available so that people in Troy can call the EPA Information Office in Libby at no charge.

# TAG Report

Gayla Benefield reported on behalf of TAG. Dr. Gerry Henningsen attended Tuesday night's TAG meeting and made a presentation about the EPA risk assessment. He is now on board as our Technical Advisor and will review technical reports and will help the TAG deal with the federal government.

# **CARD Clinic Report**

Mike Giesey and Tanis Hernandez reported on behalf of the CARD Clinic on the following subjects.

<u>HNA</u>- The CARD is struggling with HNA, the administrator if the W.R. Grace Medical Plan, to receive payment for medical services provided to Plan participants. HNA is continually changing its requirements for documentation and payments are late. These payments and other fees collected from patients and insurance companies are the only source of Clinic funding. Representatives of CARD met last Friday with staff of Senators Baucus and Burns and the Lincoln County Commissioners. We are seeking funding from private foundations. <u>Federal Asbestos Legislation</u> - Dr. Black traveled to Washington DC to explain the need for the DLCO, a diffusion test, to ensure that Libby people will qualify for the assistance provided in the

legislation, specifically the Libby fix.

Research Blood Drawing - The blood drawing went well except for the time involved. Because of the number of volunteers, people had to spend longer than anticipated at the Clinic. This was the first of these events, and we will improve the process to reduce the waiting time. The actual process takes only about 20 minutes with most of the time needed to fully understand the research and give informed consent. The actual blood drawing takes only a short time. We also plan to travel to major employers in the community so people can contribute blood samples to research without being inconvenienced by leaving their site of employment.

<u>Karmanos Cancer Center Focus Groups</u> - We are actively recruiting volunteers to participate in the focus groups the second and third weeks of March which will be run by the Karmanos Cancer Center researchers who were here last month. We need volunteers with three different backgrounds: people with asbestos-related disease (ARD), family members of people with ARD who themselves do not have the disease, and people with no disease and whose family members also do not have the disease. Volunteers must also be at least 21 years of age and must have been Libby residents for five years. Information discussed in the focus groups will be kept strictly confidential. Participants in the focus groups will receive \$40 in "Libby Bucks."

Newsletter - The latest CARD newsletter is out.

CAG Member Question - What time of the day will the focus groups meet? Answer - Either 2:00 p.m. or 7:00 p.m.

*CAG Member Question - How often will each group meet?* Answer - Only once.

CAG Member Question - How many people will be in each group? Answer - There will be five to ten people in a group.

# **Federal Asbestos Legislation**

Gayla Benefield reported on the status of the federal asbestos legislation. The legislation did not pass in the Senate and has been returned to the Judiciary Committee. Seven years ago, we wanted this legislation killed so that we could continue to seek compensation in the courts. However, the W.R. Grace bankruptcy has removed this option, so we now support passage of a bill that includes the "Libby fix" and the DLCO test for eligibility. The "Libby fix" means including the entire community as potentially eligible for benefits, not just workers. Without the DLCO, only 40% of those affected here would be eligible. With this test eligibility would rise to 80%. We have had good communication with both Senators Baucus and Burns. This issue is not partisan. Both Senators are fighting for the "Libby fix" and the DLCO test. Senator Burns last teleconference was attended by about 20 people from our community including representatives of St. John's Lutheran Hospital and the CARD. Denise in Senator Burns' Kalispell Office is interested in hearing from us.

Audience Member Comment - I agree that legislation should not pass without the "Libby fix" and the DLOC eligibility test.

Audience Member Comment - I am disturbed by the waiting for passage. All of us will be gone. I'm on my last run. We should call the Senate every day. Time is also of the essence for the cleanup. Every day that goes by means some else may be exposed.

Audience Member Comment - None of us are very proud of former Governor Racicot who is lobbying against the bill for the insurance industry, which he calls "our industry."

### **Public Comment**

There was no additional public comment.

## **Next Meeting**

The next CAG meeting was scheduled for 7:00 to 9:00 p.m. on the second Thursday in March, March 9, 2006 in the Ponderosa Room of Libby City Hall.

# Appendix 1 CAG Member & Guest Attendance List February 12, 2006

Members Group/Organization Represented

David Latham The Montanian Newspaper

K.W. Maki Libby Schools

Mike Giesey CARD

LeRoy Thom LAMP/CARD Ted Linnert EPA-Denver

Peggy Churchill EPA Project Manager

Catherine LeCours DEQ

Gayla Benefield LCAVRO/TAG

Eileen Carney Montana State Board of Respiratory Care

Guests

Dan Strausbaugh Agency for Toxic Substances and Disease Registry

Dana Headapohl, MD Medical Consultant for the Montana Asbestos Screening and

Surveillance Activity (MASSA)

Claire Evans, RN MASSA

Gayle Shirley Public Information Officer, Montana Department of Health and

Human Services (DPHHS)

Christine Korhonen Environmental Public Health Tracking Project, DPHHS

# Appendix 2

# State Outreach Project Timeline and Materials Catalogue

# **Project Milestones**

Asbestos Web site launches (www.atsdr.cdc.gov/asbestos	2/6/06
Mail out new staff mailing	2/17/06
Community organizational outreach begins	
Health care provider mailing drops	3/6/06
MASSA Group #1 and #2 mailing drops	3/13/06

# **Materials Catalogue**

MASSA New Client Kit

- Cover Letter
- MASSA Fact Sheet
- Additional Resources Overview Sheet
- Tell-a-Friend Postcard
- Living with ARD
- Working with your Doctor Brochure

New Staff Mailing

- Cover Letter
- Staff Bios

MASSA Client Group I

- Letter-Screening Reminder
- Additional Resources Fact Sheet
- MASSA Fact Sheet

MASSA Client Group 2

- Letter- Screening Reminder #2
- Additional Resources Fact Sheet
- MASSA Fact Sheet

Health Care Provider Mailing

- Cover Letter
- Additional Resources
- Clinical Screening Guidelines
- Overview for Clinicians

# MASSA New Client Kit 1/09/06

### Purpose

The new client packet will be distributed to all new MASSA clients to introduce them to the services available. The packet will be introduced to MASSA staff during the staff in-service.

#### Content

- ≈ New Client Letter
  - Welcome new clients to the program, the resources available and the importance of regular, consistent screening.
- ≤ MASSA Fact Sheet outlining:
  - Who needs to be screened
  - Why screening is important
  - Overview of MASSA screening program
- = Additional resources overview
  - Provide a resource guide for people to find more information on exposure to asbestos and related health issues
- = Tell-A-Friend postcard
  - An addressable postcard designed to leverage peer-to-peer communications between those
    who have taken action regarding potential exposure to asbestos, and their family and friends
    who may not be engaged in the issue
- ≈ Working with your Doctor Brochure

### **State Health Care Provider Mailing**

### **Purpose**

The Health Care Provider mailing will be used to update the health care community about recent MASSA activity and prepare them for potential increased inquiries regarding asbestos exposure. Outreach to the health care providers will provide them with resources to effectively handle patient inquires and encourage them to actively inform potentially exposed patients about screening and health care options.

#### **Content**

- - Provides overview of state activity
  - Prepares physicians for increased inquiry
  - Outlines additional resources available
  - Provides free CME opportunities
- = Clinical screening guidelines
- ≤ Additional resources for health care providers
- = Health Care Provider mailing drops- Monday, March 6, 2006

# Appendix 3 DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES

BRIAN SCHWEITZER GOVERNOR JOAN MILES DIRECTOR

# STATE OF MONTANA

www.dphhs.mt.gov

P0 Box 4210 HELENA, MT 59604-4210

February 17, 2006

Dear Medical Screening Participant,

As a participant in the Montana Asbestos Screening and Surveillance Activity (MASSA). you may be interested in hearing about two new additions to the MASSA team: Dr. Dana Headapohl and Claire Evans, RN. They join Laura Wilson and Sharon Pesicka. who have worked with MASSA since 2003. Both Dr. Headapohl and Ms. Evans have deep roots in Montana, as well as a wealth of medical experience.

As MASSA's medical consultant, Dr. Headapohl will oversee the clinical aspects of the screening program. A native of Thompson Falls, she is one of only five specialists in the state certified in occupational and environmental medicine. She has 23 years of experience working with people who have been exposed to environmental contaminants. Dr. Headapohl is medical director of occupational and environmental health services at St. Patrick Hospital in Missoula.

Claire Evans will manage the day-to-day activities at MASSA and conduct pulmonary function tests for participants in the screening program. Raised in Libby, Ms. Evans has more than 20 years of experience as a nurse, primarily in Montana. She recently returned to her hometown.

In their new roles, Dr. Headapohl and Ms. Evans will work with the MASSA team to provide high quality screening services available to current and former Libby residents who may have been exposed to asbestos. Screening continues to be a critical first step in the early detection of asbestos-related abnormalities, and it helps your physician accurately assess your health.

The team will also play a key role in reaching out to everyone who was exposed to asbestos from the Libby mine. Since 2003, MASSA has served more than 2,200 current and former Libby-area residents with initial and follow-up screenings.

Asbestos-related disease takes a long time to develop. People must be screened regularly and consistently to detect any changes in their lungs. Even if a person's initial screening is negative, experts recommend follow-up screenings every one to five years, depending on the extent of asbestos exposure. If you are unsure when you are due for a follow-up screening, call MASSA at (406) 293-5060 or toll-free at 1-800-797-6143. A fact sheet is enclosed outlining more information about screening related to asbestos exposure.

If you have any questions or concerns about health issues related to asbestos exposure, or if you'd like more information about screening, please contact MASSA or visit www.atsdr.cdc.gov/asbestos.

Sincerely,

Steven D. Helgerson, M.D., MPH. State Medical Officer

# **MONTANA**

# **Department of Public Health & Human Services**

### Dana Headapohl, M.D., M.P.H.

As the new medical consultant for the Montana Asbestos Screening and Surveillance Activity (MASSA), Dr. Dana Headapohl is responsible for providing clinical oversight to the program. She is one of only five specialists in Montana certified in occupational and environmental medicine. A native of Thompson Falls, Montana, she has over 23 years of experience working with people who have been exposed to environmental contaminants.

Dana is medical director of occupational and environmental health services at St. Patrick Hospital in Missoula, Montana, where she supervises patient care, disease management programs, risk assessments, and other related programs. Dana also has served as medical director of the quality risk management department of Community Medical Center in Missoula.

She earned her Doctor of Medicine degree from the University of Washington in Seattle and a master's degree in public health from the Medical College of Wisconsin.

### Claire Evans, RN

Claire Evans serves as a registered nurse for the Montana Asbestos Screening and Surveillance Activity (MASSA), managing and administering pulmonary function tests for program participants. She has over 20 years of nursing experience, working in psychiatric nursing and as a registered nurse in hospitals across Montana and Eastern Washington.

Raised in Libby, Claire holds a bachelor's degree in nursing from Montana State University in Bozeman and a bachelor's degree in history from the University of Montana in Missoula.

#### **Sharon Pesicka**

As an interviewer for the Montana Asbestos Screening and Surveillance Activity (MASSA), Sharon Pesicka collects information from screening participants about their life and work histories to assess their possible exposure to asbestos. She has been involved in asbestos screening since 2000, when she served as an interviewer for the National Opinion Research Center (NORC). She then worked for NORC in the Agency for Toxic Substances and Disease Registry (ATSDR) Libby office. Sharon lives in Troy, Montana, with her family.

### Laura Wilson

Laura Wilson has been an interviewer for the Montana Asbestos Screening and Surveillance Activity (MASSA) since 2003. Previously she worked as an interviewer for a number of agencies, including the National Opinion Research Center (NORC) and NORC/ATSDR, where she participated in a dioxin study in Louisiana. Laura moved to Libby about five years ago and hopes to retire there.

# **Review Draft - Not for Quotation**

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